

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

218031

(FORM 1)

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET

NUMBER: 2009-295-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Owl Enterprises Inc.

Address: 1511 King St.
Beaufort, SC 29902

Telephone: (843) 982-6307 of

Fax: (843) 982-6306

Other: (843) 379-6448 office

Email:

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Application - Class C Taxi | <input type="checkbox"/> Request to Amend Scope of Authority |
| <input type="checkbox"/> Application - Class C Charter | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc) |
| <input type="checkbox"/> Application - Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input type="checkbox"/> Application - Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application - Class E Household Goods | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application - Class E Hazardous Waste | <input type="checkbox"/> Late-Filed Exhibit |
| <input checked="" type="checkbox"/> Application | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Proposed Order |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit |
| <input type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Response |
| <input type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Request for Name Change on Certificate | <input type="checkbox"/> Other: |

RECEIVED

JUN 29 2009

PSC SC
DOCKETING DEPT.

RECEIVED
JUN 29 2009
PSC SC
DOCKETING DEPT.

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-510

JBS

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
ATTN: DOCKETING DEPARTMENT
101 EXECUTIVE CENTER DRIVE
COLUMBIA, SC 29210

(Mailing address: Post Office Box 11649, Columbia, SC 29211)
 (Office # 803-896-5100) (Fax # - 803-896-5199)

CLASS C - NON-EMERGENCY

DATE JUNE 24th, 20 09

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY
 FOR OPERATION OF MOTOR VEHICLE CARRIER**

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Owl Enterprises Inc.

2. (a) Street Address of Applicant 1511 King St.

Beaufort SC 29902

(b) Mailing address, if different from street address _____

(c) Telephone Number (843) 982-6301 Fed. II

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, need SC Secretary of State "Foreign Corporation" Certificate.)

4. (a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.

~~2512~~ Lester B Walker
2512 Tuscan Oaks Ln Jacksonville FL 32223
Rathan Smith
200 Imperial Way, Fairburn GA 30213

5. The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith.

6. The proposed list of equipment is as per Exhibit "D" included herewith.

7. Applicant is financially able to furnish the services as specified in this Application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month: June Year: 2009

Assets:	
Cash	28282.00
Receivables	34000.00
Real Estate	
Buildings and Equipment-Net	11055.00
Motor Vehicles-Net	163085.00
Garage Equipment-Net	
Machinery and Tools-Net	
Supplies on Hand	
Prepays and Other Assets	
Total Assets	235422.00
Liabilities and Equity:	
Accounts Payable	34000.00
Notes Payable	49937.00
Mortgages Payable	
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities	
Capital Stock	
Retained Earnings	
Total Equity	151485.00
Total Liabilities and Equity	235422.00

8. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,

COUNTY OF Beaufort

or DWIGHT W. BARKER, INC. the Applicant for the Certificate of Public (Applicant)

Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application are true and correct.

SWORN TO BEFORE ME

Jenkins, SCThis the 26th day of June, 2009

(Notary Public)

Commission Expires: 7/15/2015

(Signature of Applicant's Representative)

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby certify that:

OWL ENTERPRISES, INC.,
a corporation duly organized under the laws of the State of South Carolina on April 6th, 2009, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the Secretary of State, that the Secretary of State has not mailed notice to the Corporation that it is subject to being dissolved by administrative action pursuant to section 33-14-210 of the South Carolina Code, and that the corporation has not filed articles of dissolution as of the date hereof.

Given under my Hand and the Great
Seal of the State of South Carolina this
8th day of April, 2009.

A handwritten signature in cursive script that reads "Mark Hammond".
Mark Hammond, Secretary of State

Note: This certificate does not contain any representation concerning fees or taxes owed by the Corporation to the South Carolina Tax Commission or whether the Corporation has filed the annual reports with the Tax Commission. If it is important to know whether the Corporation has paid all taxes due to the State of South Carolina, and has filed the annual reports, a certificate of compliance must be obtained from the Tax Commission.

EXHIBIT C

NON EMERGENCY

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

Columbia, South Carolina

Applicant Owl Enterprises Inc.


For the transportation of passengers as follows:

Area to be served: Jasper, Beaufort

Number of passengers: 150 10 passengers per trip

Fares: 1.81 per mile

Date JUNE 24th, 2009


Dr. Laster B Walker
By

President, Geo

Rev. 8/00

EXHIBIT D

STATE OF SOUTH CAROLINA
PUBLIC SERVICE COMMISSION

DESCRIPTION OF EQUIPMENT

VEHICLE NUMBER	MAKE	MODEL & YEAR	SERIAL #	WEIGHT EMPTY	CARRYING CAPACITY *
#211	Ford	2002	1FDWE35L92HB15044	WC	14
#215	Ford	2005	1FDWE35L95HB24384	WC	14
#217	Ford	2006	1FDWE35L96HAC03825	WC	14
#220	Ford	2006	1FBSS31L65HB11274	WC	14
#221	Ford	2006	1FBSS31L26HA52936	AMB	15
#222	Ford	2006	1FBSS31L35HA52928	AMB	15
#224	Dodge	2000	2B4GP25G3AB733606	AMB	6
#235	Ford	2005	1FBSS1L26DB15167	AMB	15
#236	Ford	2006	1FBSS3107DB40800	AMB	15
#237	Ford	2005	1FDWE35L47DB32502	WC	14
#238	Ford	2004	1FDNE35L34HA17517	AMB	15
#239	Ford	2007	1FBXE45S7TDA88254	AMB	15

* Seats if passenger carrier or tonnage if freight carrier.

* Designate if equipped with wheelchair lift

Owl Enterprises Inc.

(Applicant)

Date: June 24th, 2009

(Applicant's Representative)

President, CEO

(Title)

INSURANCE QUOTE

The following insurance quote is for:

Owl Enterprises Inc.

(Name of Motor Carrier)

1511 King St. Beaufort, SC 29902

(Address of Motor Carrier)

*Note: Bodily injury and property damage limits will not be less than the following:

- a. Liability Combined Each Occurrence \$1,000,000
b. Medical Payments/Each Person \$1,000

116 K Auto
38 K GL
24 K WC

Amount of Premiums:

Liability Insurance

1,000,000

★ Quote
\$14,833.00

The above quoted premiums are for a term of 12 months.

AMERICAN SPEC INS GROUP

(Insurance Company Name)

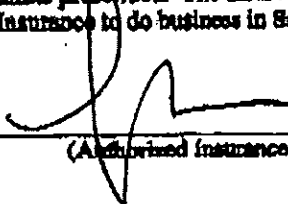
2111 45TH ST #2 WEST PALM BEACH, FL 33407

(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

6/25/09

Date



(Authorized Insurance Company Representative)

200/2002

12/24/2015 14:50 FAX

010/1002

07/20/2008 16:22 FAX

EXHIBIT FWA

Name: Owl Enterprises Inc
Address: 1511 King St. Beaufort SC 29902
Telephone No. (843) 982-6307 Fax No. (843) 982-6306
U.S.D.O.T. No. _____ ICC No. _____

1. Does Applicant have a Safety Rating from the U.S.D.O.T.?
Yes _____ No X Pending _____ (Submit when received)
(If "yes", indicate rating and provide copy) Satisfactory _____
Conditional _____
Unsatisfactory _____
2. Have any of Applicant's drivers or vehicles been placed "out of service" by Transport Police safety officers in the past twelve (12) months?
Yes _____ No X
3. Are there currently any outstanding judgement(s) against Applicant?
Yes _____ No X
(If "yes", indicate nature of judgement(s).)
4. Is Applicant familiar with all statutes and regulations, including safety regulations, governing for-hire motor carrier operations in South Carolina and does applicant agree to operate in compliance with these statutes and regulations?
Yes X No _____
5. Is the Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?
Yes X No _____
(The attached Insurance Quote form must be completed, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide copy of insurance policies unless requested.)

[Signature]
(Applicant's Signature)

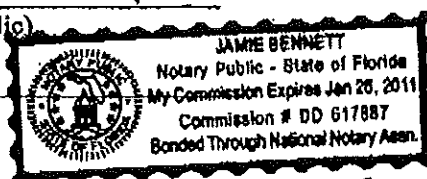
Sworn to before me

At Jacksonville, FL

This 26th day of June 20 09

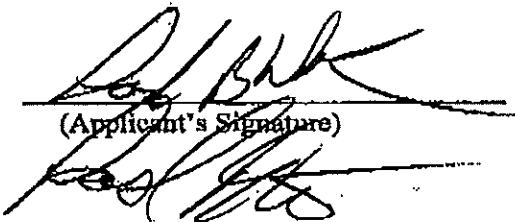
[Signature]
(Notary Public)

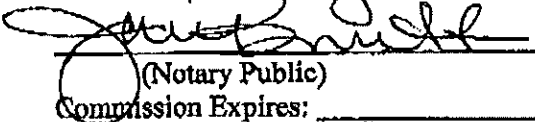
Commission Expires: _____



APPLICANT'S OATH

I, Dr. Lester B Walker, verify under the laws of the State of South Carolina, that all information supplied on this form or relating to this application is true and correct. I certify that I am qualified and authorized to file this application. I certify that all vehicles owned and/or operated by the applicant have current Record of Annual Inspection forms on file at the company's primary place of business. I further certify that according to R. 103-133(4) (a), Proof Required to Justify Approving an Application, I have read the attached regulations governing Class C Non-Emergency Carriers and pledge to abide by these and all pertinent Statutes, Standards and Regulations. I am aware that willful misstatements or omissions of material facts may constitute grounds for revocation of any certificate that may be granted to me by the Commission, and/or may subject me to such other penalties as may be prescribed by South Carolina law. (Note: This oath embraces all schedules and supplemental filings to this application.)


(Applicant's Signature)

Sworn to before me
At Jacksonville FL
This 26th day of June, 2009

(Notary Public)
Commission Expires: _____

